

Credit Application for Property Improvement Loan

U.S. Department of Housing
and Urban Development
Office of Housing

OMB Approval No. 2502-0328 (exp. 7/31/1999)

This application is submitted to obtain credit under the provisions of Title I of the National Housing Act. Please answer all questions.

Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Reports Management Officer, Paperwork Reduction Project (2502-0328), Office of Information Technology, U.S. Department of Housing and Urban Development, Washington, D.C. 20410-3600. This agency may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number.

Do not send this form to the above address.

Privacy Act Statement: The Department of Housing and Urban Development (HUD) is authorized to collect this information by Title I, section 2 of the National Housing Act (12 U.S.C. 1703), and to obtain and verify your Social Security Number (SSN) by section 165 of the Housing and Community Development Act of 1967 (42 U.S.C. 3543). **You must provide all of the information requested.** This information will be used to determine your creditworthiness and to assist HUD in accounting for and monitoring the use of Title I funds. Your SSN is a unique identifier which may be used to conduct computer matches to verify the information you provide. This information may be given to Federal, State, or local agencies when relevant to civil, criminal, or regulatory investigations or prosecutions. It will not be otherwise disclosed or released outside of HUD or the lending institution which will provide the loan funds, except as required or permitted by law. Failure to provide any of the requested information may result in delay or rejection of your application.

General Information: You are required to answer the questions on sex, race and ethnic background. Your answers are needed to determine the characteristics of Title I program beneficiaries, and will not affect consideration of your application. By providing this information, you will assist us in ensuring that this program is administered in a nondiscriminatory manner. If you feel you have been discriminated against and you want to report it, the Fair Housing and Equal Opportunity Hotline Number is (800) 424-8590.

I/We hereby apply for a loan of \$		(net) to be repaid in	months.	Date :
1. Do you have any past due obligations owed to or insured by any agency of the Federal Government? (If the answer is "Yes," you are not eligible to apply for an FHA Title I loan until the existing debt has been brought current.)				
<input type="checkbox"/> Yes <input type="checkbox"/> No				
2. Have you any other application for an FHA Title I loan pending at this time? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes," with whom?				
3. Are you refinancing a Title I loan? If "Yes," enter: ... the loan number : _____ ... and balance owing :\$				
<input type="checkbox"/> Yes <input type="checkbox"/> No				
4. Are there any unsatisfied judgments against you? <input type="checkbox"/> Yes <input type="checkbox"/> No				
5. Are you a party in a pending lawsuit? <input type="checkbox"/> Yes <input type="checkbox"/> No				
6. Have you been declared bankrupt in the last seven years? <input type="checkbox"/> Yes <input type="checkbox"/> No				
7. Has your property been foreclosed upon in the last seven years? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Explain any "Yes" answers to items 4 thru 7.				

Applicant				Co-Applicant			
Name of Applicant :				Name of Co-Applicant (if any) :			
Social Security Number :		Telephone Number :		Social Security Number :		Telephone Number :	
Present Address :				Present Address :			
How long? Own or Rent?				How long? Own or Rent?			
Previous Address :				Previous Address :			
How long? Own or Rent?				How long? Own or Rent?			
Marital Status : <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (incl. Single, Divorced, Widowed)				Marital Status : <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (incl. Single, Divorced, Widowed)			
Sex : <input type="checkbox"/> Male <input type="checkbox"/> Female		Date of Birth :		Sex : <input type="checkbox"/> Male <input type="checkbox"/> Female		Date of Birth :	
		No. of Dependents :				No. of Dependents :	
Check Appropriate Box 1. <input type="checkbox"/> White, not Hispanic 3. <input type="checkbox"/> American Indian or Alaskan Native 2. <input type="checkbox"/> Black, not Hispanic 4. <input type="checkbox"/> Asian or Pacific Islander 5. <input type="checkbox"/> Hispanic				Check Appropriate Box 1. <input type="checkbox"/> White, not Hispanic 3. <input type="checkbox"/> American Indian or Alaskan Native 2. <input type="checkbox"/> Black, not Hispanic 4. <input type="checkbox"/> Asian or Pacific Islander 5. <input type="checkbox"/> Hispanic			
Name and Address of Nearest Relative Not Living with You :				Name and Address of Nearest Relative Not Living with You :			
Relationship		Telephone No.:		Relationship :		Telephone No.:	

Employment & Income. If self-employed, submit a current financial statement. (Note: Alimony, child support, or separate maintenance income need not be reported unless you will rely upon it for repaying this loan.)

Applicant		Co-Applicant	
Employer's Name & Business Address :		Employer's Name & Business Address :	
Business Phone :	Type of Work or Position :	Business Phone :	Type of Work or Position :
Number of Years :	Salary Per Week or Month : \$ _____ per	Number of Years :	Salary Per Week or Month : \$ _____ per
Previous Employer's Name & Business Address (if less than two years earlier) :		Previous Employer's Name & Business Address (if less than two years earlier) :	
Business Phone :	Type of Work or Position :	Business Phone :	Type of Work or Position :
Number of Years :	Salary Per Week or Month : \$ _____ per	Number of Years :	Salary Per Week or Month : \$ _____ per
Other Income Source :	Amount Per Week or Month : \$ _____ per	Other Income Source :	Amount Per Week or Month : \$ _____ per
Bank Accounts : <input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> None Name & Address of Bank or Branch :		Bank Accounts : <input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> None Name & Address of Bank or Branch :	

Debts. List all fixed obligations, installment accounts, FHA loans, and debts to banks, finance companies and Government agencies.

If more space is needed, list additional debts on separate pages and attach them to this form.

Automotive Lienholder :	Year & Make :	Original Amount of Debt : \$	Present Balance : \$	Monthly Payment : \$
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Real Estate Lienholder :	FHA Insured ?	Original Amount of Debt : \$	Present Balance : \$	Monthly Payment : \$
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To Whom Indebted :	Account No.:	Original Amount of Debt : \$	Present Balance : \$	Monthly Payment : \$
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Property to be Improved

Type of Property:

- ☐ Single family
☐ Multifamily (No. of units : _____)
☐ Nonresidential (Type of use : _____)
☐ Manufactured home (not classed as realty)
☐ Historic residential structure (No. of units : _____)
☐ Health care facility

Is this property :

- Owned by you? ☐ Yes ☐ No
Leased from someone else? ☐ Yes ☐ No
Being purchased on a land installment contract? ☐ Yes ☐ No

Is there a mortgage or deed of trust on this property? ☐ Yes ☐ No

Address (number, street, city, state & zip code) :

Name & Address of Property Owner (if different from the applicant):

Year Built :

Date of Purchase :

Monthly Lease Payment :

Lease Expiration Date :

Purchase Price :

Present Value :

If this is a new residential structure, has it been completed and occupied for 90 days or longer?

☐ Yes ☐ No**Improvements** (itemized cost breakdown **must** be attached)

Description of Improvements :

Name & Address of Dealer / Contractor :

Estimated Cost :

\$

Notice: If this structure was built before 1950, it may contain lead-based paint which, if eaten, may cause mental retardation, blindness, paralysis, or even death. Symptoms may include stomach aches, vomiting, headaches, a loss of appetite, crankiness or frequent tiredness. A child who is suspected of having eaten lead-based paint should be taken immediately to your local doctor, clinic or hospital for screening or treatment. The best way to prevent lead-based paint poisoning is to keep your home in good condition and remove any lead-based paint hazards. For detailed information on the prevention and elimination of lead-based paint hazards, please contact your local HUD office for a free pamphlet entitled "Lead Poisoning: Watch Out for Lead-Based Paint."

Important! Applicant, Read this before Signing:

I /We certify that the above statements are true, accurate, and complete to the best of my (our) knowledge and belief. This application shall remain the property of the lending institution to which it is submitted for the purpose of obtaining a loan.

I /We hereby consent to and authorize the lending institution or HUD, after giving reasonable notice, to enter the improved property to determine that the improvements specified in this application have been completed.

I /We understand that the selection of a dealer or contractor and the acceptance of the materials used and the work performed is my (our) responsibility, and HUD does not guarantee the quality or workmanship of the property improvements.

Applicant's Signature:

X

Co-Applicant's Signature:

X

Note to Salesperson: If the loan proceeds will be disbursed to a dealer or contractor, the person selling the improvements must sign the following certification:

I certify that: **1)** I am the person who sold the job; **2)** the Contract contains the whole agreement with the borrowers; **3)** the borrowers have not been given or promised any cash payment, rebate, cash bonus, sales commission, or anything of value in excess of \$10 as an inducement to enter into this loan transaction; **4)** the improvements have not been misrepresented; **5)** no promises have been made that are impossible of attainment, encourage trial purchase, or imply that the improvements will be used as a model for advertising or other demonstration purposes; and **6)** no offer of debt consolidation has been made.

Salesperson's Name:

Salesperson's Signature:

X

Name of Dealer/Contractor:

If this application is prepared by someone other than the applicants, that person must sign below. I certify that the statements made herein are based upon information given to me by the applicants and are true, accurate and complete to the best of my knowledge and belief.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Prepared by:

X

Representing:

Address:

Name & Address of the Lending Institution:	Information verified with applicant by: <input type="checkbox"/> Face-to-face interview <input type="checkbox"/> Telephone interview By (Signature of Loan Officer) : X
Social Security Number Verification	Credit Alert Access Code
Applicant :	Applicant :
Co-Applicant :	Co-Applicant :

Reserved for use by the Lending Institution